

Information and Assistance Caller Interview
DRAFT 7.11

Before calling, fill in Caller ID and your site name in the top right corner of each page, as well as the demographic information on the last page.

Introductory Script:

Hello. I need to speak with [caller's name - *do not record on this page*].

Hello, [name]. My name is [interviewer name].

I am calling today from [site name] to make sure your needs were met and that you were happy with the information and service you received. Feedback from people who use our services helps us to find ways to improve our services.

If you decide to talk with me today, your comments will be completely confidential. We are very interested in your honest opinions. The questions I have will take about 10 minutes to answer. Are you willing to talk with me today, or would you prefer to schedule a time and date in the next couple of days to talk?

[Check one]

☐ *Will participate today*

☐ *Will participate on: _____ (date) at _____ (time)*

☐ *Declined to participate*

☐ *Does not recall contacting MILTCC*

Interview

Thank you for agreeing to talk with me today. Let's begin with some questions about the information you received when you contacted [site name]. I am going to read several statements. I'd like you to tell me whether you strongly disagree, disagree, agree, or strongly agree with each statement. Do you have any questions before we begin?

*[Read each statement and all four response options. Do not read "don't know" or "NA" but use as appropriate. Skip items that are preceded with a * if talking with a professional and circle "NA."]*

	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	NA
1. I received the information I wanted.	1	2	3	4	98	99
2. The information I received was clear.	1	2	3	4	98	99
3. The information I received was accurate.	1	2	3	4	98	99
4. The information I received was helpful.	1	2	3	4	98	99
5. *The information I received gave me choices.	1	2	3	4	98	99
6. *The information I received respected my values.	1	2	3	4	98	99
7. I understood the information I received.	1	2	3	4	98	99
8. I used the information I received to make decisions.	1	2	3	4	98	99

9. Do you have any comments about the information you received that you would like to share with me before we go to the next section?

Now I would like to talk with you about the quality of the services you received from [insert site name]. Again, I am going to read several statements. I'd like you to tell me whether you strongly disagree, disagree, agree, or strongly agree with each statement.

*[Read each statement and all four response options. Do not read "don't know" or "NA" but use as appropriate. Skip the item that is preceded with a * if talking with a professional and circle "NA."]*

	Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know	NA
10. The person I spoke with was knowledgeable.	1	2	3	4	98	99
11. The person I spoke with was friendly.	1	2	3	4	98	99
12. *The person I spoke with treated me with respect.	1	2	3	4	98	99
13. The person I spoke with listened carefully to what I wanted.	1	2	3	4	98	99
14. Someone helped me in a reasonable amount of time.	1	2	3	4	98	99
15. I was satisfied with the assistance I received.	1	2	3	4	98	99
16. I would call the Long Term Care Connection again in the future, if I needed to.	1	2	3	4	98	99
17. I would recommend this service to someone else who needed it.	1	2	3	4	98	99

18. Do you have any additional comments about the quality of the services you received?

19. Is there anything I can help you with today, or do you have any other comments you'd like to share with me?

20. If we have additional questions, may we call you again in the future? (Please circle)

Yes

No

Interview Start Time_____

Interview End Time_____

Please fill in this section prior to completing the call based on the caller's Service Point record. If any fields are missing, please ask the consumer for the missing information at the end of the call. Only ask the caller for information that is missing.

Before we end today, I would like a little information about you. This information will tell us about the people we are reaching with our services. This information will be kept completely confidential. As with the rest of the survey, you do not have to answer any questions you'd prefer not to answer.

21. When you called or visited our office, for whom were you seeking help?

☐ Self

(answer q. 21-22)

☐ Parent

☐ Child

☐ Other relative

☐ Friend

☐ Client

(answer q. 23-24)

☐ Professional

(not for a client -
end survey)

22.*Are you 60 years of age or older?

☐ No ☐ Yes ☐ Don't know

22.*Did you call for someone 60 years of
age or older?

☐ No ☐ Yes ☐ Don't know

23.*Do you have a disability?

☐ No ☐ Yes ☐ Don't know

23.*Does the person you called for have
a disability?

☐ No ☐ Yes ☐ Don't know

[If called for "self" or "parent, child, other relative, friend, or client," continue with q. 25]

24.*What is your race/ethnicity [please check all that apply]?

☐ American Indian or Alaska Native

☐ Native Hawaiian or Pacific Islander

☐ Asian

☐ Black or African American

☐ Hispanic/Latino

☐ White or Caucasian

☐ Other, please specify

25.*What is your gender?

☐ Male ☐ Female ☐ Don't know

26.*What is your family income? [Use actual dollar amounts when asking the question]

☐ \$10,000 or less

☐ More than \$10,00 but less than \$20,000

☐ More than \$20,00 but less than \$30,000

☐ More than \$30,000 but less than \$40,000

☐ More than \$40,000 but less than \$50,000

☐ More than \$50,000

☐ I Don't know

27. *What county do you live in?

MILTCC

Caller ID

Thank you very much for talking with me today. If you have any questions about this interview, please contact Julia Heany at 517-324-7349. If you have questions or need assistance with long term care, please contact [insert correct #].